

BUDLEIGH SALTERTON
URBAN DISTRICT.

Annual Report

FOR 1904,

OF THE

VITAL STATISTICS,

SANITARY WORK, &c.,

By CLARENCE BEESLEY,

D.P.H. Camb., &c.,

Medical Officer of Health.

BUDLEIGH SALTERTON:

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EXETER ROAD,

EXMOUTH.

GENTLEMEN,

I have the honor to present the Annual Report for the past year, 1904. This Report, like its predecessors, treats of the past and present sanitary condition of the District, the different matters relating to Public Health and the improvement of the District, which have engaged your attention during the year, and the manner in which the Bye-laws in force have been obeyed. The different headings are arranged as in previous Reports, thereby affording a ready means of reference and comparison. Four tables of statistical information will be found at the end. These tables are important, and every care has been taken to ensure accuracy in their compilation, as the Local Government Board and Devon County Council derive their knowledge of the various "rates," etc., from them.

Table 1. Shows the vital statistics of the whole District during 1904, compared with those for the previous ten years and the averages during that period.

Table 2. This table is inapplicable to your District and has been disregarded.

Table 3. Indicates the number and nature of the Infectious Diseases which have been notified, classified according to age.

Table 4. Shows the causes of, and ages at, death during the year.

I. GENERAL SANITARY CONDITION OF THE DISTRICT.

Before proceeding to work out the various "rates" it is necessary to determine the population for the year 1904, and when this has been ascertained, it is a simple matter to compute the "rates" per 1,000 population, this being the universal procedure, in order to render comparison easy. The population of Budleigh Salterton is therefore assumed to be 1947 for last year, these figures being arrived at by the usual means adopted by statisticians. The total number of Deaths registered was 32, of these 10 were males and 22 females, and the death rate was 16·4 per 1,000. The figures for 1903 were 28 and 14·6 respectively, and the average death rate for the last 10 years was 17·4. The preponderance of female over male mortality is very noticeable, but it is not easy to assign a cause for this, although one obvious reason is that there are more females than males in the District. Table 1 shows the quarterly death returns.

1.

	Jan., Feb., Mar.	April, May, June.	July, August, September.	Oct., Nov., Dec.
Males	5	3	2	
Females	5	6	2	9
Total per quarter	10	9	4	9

A very large proportion of the deaths occurred amongst aged people of whom there were the following :

65 and under 70	..	..	3
70 „ „ 80	..	..	9
80 „ „ 90	..	..	4
90 and upwards	..	..	Nil.

Total 16

The average age at death of these 16 persons (12 of whom were females) was 75·1 years.

TABLE SHOWING AGES AT WHICH DEATH OCCURRED.

Under 1 year.	1 to 5.	5 to 15.	15 to 25.	25 and under 65.	65 and upwards.
1	4	2	Nil.	9	16

The ZYMOTIC DEATH RATE. This is the number of persons per 1,000 population dying from the 7 principal Zymotic diseases, which include Smallpox, Measles, Scarlatina, Diphtheria, Whooping Cough, Fever (Typhus and Enteric), and Diarrhœa. One death took place from Whooping Cough, the victim being a child of 2 years, producing a Zymotic death rate of .51. This is a very low rate and speaks well for the general healthiness of Budleigh Salterton, and its fitness to be placed in the first rank of health resorts.

INFANT MORTALITY. Is a term used to denote the number of children dying under one year, and for the sake of uniformity estimated at per 1,000 births. Only one death occurred, in a male aged 4 days, which gives an infant mortality of 29.4; this is equivalent to saying that out of 1,000 children born alive, 29.4 would die before reaching the age of twelve months. This is an extremely low rate, the average for the last ten years being 91.46.

Diarrhœa, Measles, Whooping Cough, Bronchitis, etc., influence Infant Mortality, and the same must be said of ignorance in the artificial feeding and general management of infants by parents. The climatic conditions which prevailed during 1904 were antagonistic to the first-named causes, and with regard to the latter, there is every reason to believe that infants in your District are carefully tended, and it is not too much to say that skilled professional advice probably plays a very important role in preventing improper feeding and unsanitary proceedings generally.

TABLE SHOWING POPULATION, BIRTHS, DEATHS AND
RATES FROM CERTAIN DISEASES.

Population June, 1904.	Births per 1,000.	Deaths per 1,000.	Zymotic Death Rate.	Infant Mortality.	Phthisis.	Heart Disease.	Bronchitis and Pneumonia	Cancer.	Nervous System (Brain).	Diabetes.
1947	17.0	16.4	.51	29.4	1.5	1.5	2.0	3.0	3.0	1.5

It will be seen from the above table that Cancer and Diseases of the Nervous System predominate as causes of death, the average age at death, in the former, being 55 years, and in the latter, 76 years. The mortality from diseases of the Heart and Respiratory System (Bronchitis and Pneumonia), is greater than in 1903, whilst Phthisis remains the same. It is a curious circumstance that there should be three deaths from Diabetes registered during the year, these cases being the first which have occurred since I was appointed Medical Officer of Health. All three were females, and the average age at death was 69 years. It is most gratifying to those who have the welfare of the district at heart, to be able to report an absence of any fatal case caused by Notifiable Infectious Diseases, these diseases (scheduled in the Act of 1889), being Smallpox, Cholera, Diphtheria, Membranous Croup, Erysipelas, Scarlatina, Typhus, Enteric Fever, Relapsing Fever, Continued Fever and Puerperal Fever. Acting on my advice, you have included Chicken Pox in the above list, and this will undoubtedly be for the good of the community. It may be well to briefly recapitulate some of the advantages of Compulsory Notification to the Medical Officer of Health, and amongst others I may mention the following:—

- 1.—Early knowledge of all cases and thus of the whole prevalence and distribution in the district.
- 2.—Power to enforce the due observance of the provisions of the Public Health Acts in every case.
- 3.—Removal to Hospital where desired by the patient or friends.
- 4.—Opportunity of investigating the sanitary condition of the infected premises.

5.—Power to control the spread of infection by exclusion of members of infected households, from schools, &c.

6.—Means of detecting any suspicious grouping of cases around schools, milk supplies, water supplies, or other common focus.

BIRTHS. 34 births were registered during 1904, 18 males and 16 females. This gives a birth rate of 17·0 per 1000, last year it was 17·8, and the average for the last ten years was 15·6. The “natural increase,” or proportion of births to deaths, viz: 34:32 is very low. A birth rate of 17·0 is much below the average for the whole country, but in criticising it due attention must be paid to several factors. Thus, it is higher in towns and in times of prosperity, lower in rural districts and periods of depression of trade. Moreover, the age distribution of a community must be taken into account, for where there is a preponderance of persons of mature age, there will be necessarily fewer young adults with correspondingly lower birth rate. A few reasons for this unequal age distribution in your district have been given in previous reports.

II. AREA & DENSITY OF POPULATION.

The total area of the District is 840 acres, and the density of persons per acre equals 2·31. The number of inhabited houses is 472, an increase of 16 over those at the census of 1901. The average number of persons per house is 4·12.

III. WATER SUPPLY.

It is universally conceded that an abundant supply of pure water is absolutely necessary in a district, if a proper standard of health and municipal efficiency is to be attained. It cannot be said that this obtains in your district at the present time. The purity of the present supply—so far as it goes—is unquestionable, as the analysis given below shows, but the quantity is insufficient for all needs. The following table gives the quantities required, on an average, for various purposes:—

DOMESTIC USE.

	Gallons per head daily.
Drinking (besides which 30 to 50 ounces is taken in bread, meat, &c.) ..	0·33
Cooking	0·75
Ablution	5·00
Share of Utensil and House Washing ..	3·00
Share of Clothes Washing ..	3·00
Water Closets	6·00
General Bath (weekly about 30 gallons) ..	4·00
Unavoidable Waste	3·00
	<hr/>
	25·08
	<hr/>

TOWN AND TRADE PURPOSES.

Washing Streets, Courts, &c., allowance for Trade and for Animals, Extinguishing Fires, &c.	5·00
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Making a total of ..	30·08
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There are two sources of supply in this district, viz : Sherbrook and Kersbrook. The Sherbrook supply is quite inadequate. At Kersbrook there is not sufficient water to drive the turbine in dry weather, so that at such times a Steam Engine has to be requisitioned to help it to drive the pumps. It may here be mentioned that an application is before the Local Government Board for sanction to purchase an Oil Engine, at a cost of £85, to work the pumps.

It must, however, be borne in mind that this engine will only deliver water to a height of 135ft. above ordnance, whereas the highest point we have is 372ft. above ordnance, and therefore this arrangement cannot be satisfactory in the long run. The problem of a further supply to the district must be solved in the near future, for with the opening of the railway and consequent publicity given to the attractions of the place, there must be a greater influx of visitors each summer, and a necessarily increasing population to be catered for. An excellent scheme, for a practically unlimited supply, was prepared by Messrs. Beesley, Son & Nicholls, of London, and was approved of by a majority of the Council, but, at a meeting of the Ratepayers, convened to ascer-

tain the feeling of the public in regard to this important measure, it was clearly indicated by those present that the scheme was not appreciated. The matter is thus in abeyance, but it cannot remain so, and presumably some other project will be announced. One other fact about the water supply must be mentioned, and that is the unsatisfactory state of the filter beds. Only about one-third of the water delivered to the district is filtered, and when it is remembered that the golf links constitute one source, there must be some risk of pollution by cattle, &c., if filtering is not efficiently performed.

ANALYSIS OF WATER SUPPLY OF THE DISTRICT IN GRAINS PER GALLON.

	SHERBROOK.		KERSBROOK.	
Total Solids ..	10·2	..	24·1	
Chlorides (as Chlorine)	2·9	..	2·3	
Total Hardness ..	2·9	..	15·6	
Permanent Hardness	2·1	..	2·0	
Nitrites ..	·0	..	·0	
Nitrates ..	·27	..	·28	
Saline Ammonia ..	·0005	..	·0003	
Albuminoid Ammonia	·0038	..	·0031	
Poisonous Metals ..	absent	..	absent	

During the year all precautions have been taken to prevent waste, by a rigorous scrutiny of taps, &c., and the prompt detection and treatment of leakages, whether caused by negligence or accident.

IV. CONDITION OF HOUSES IN THE DISTRICT.

The condition of houses in the district does not give cause for any complaint. All alterations have been made, and new buildings erected, in strict accordance with the Bye-laws in force. No cases of overcrowding have been brought to my notice, and any structural defects or nuisances detected have been remedied, to the satisfaction of the Inspector and myself.

V. INFECTIOUS DISEASES.

Fortunately only two cases, neither of which were fatal, were reported during the year.

One was a case of Enteric Fever in a boy. He had been spending a holiday in Whimble and came home looking ill. Some days afterwards he was found to be suffering from Enteric Fever, and he probably contracted it in Whimble. No sanitary defects were detected on the premises in which he lived, and the usual directions were given for the disinfection of the excreta, &c., &c.

The other case notified was one of Erysipelas, and does not call for any detailed explanation.

It is thus seen that the district was remarkably free from infectious diseases during 1904. Chicken Pox has been added to the list of Notifiable Diseases, so that, in future, it will be impossible for an outbreak of this disease to occur without my knowledge, as happened recently, the action of those concerned giving rise to some criticism by the Members of the Council. Acting on my advice, you have resolved to disinfect premises in which cases of Phthisis has occurred, for there is no doubt about the infectious nature of this disease, and your decision is a move in the right direction.

VI. SEWERAGE AND SCAVENGING.

The removal of house refuse, &c., has been systematically carried out during the year, and no complaints have been received as to remissness on the part of your employees.

It has been evident for some time that something would have to be done to combat the numerous complaints which have been made as to the disposal of the Sewage of the District. The plan at present in vogue of allowing it to discharge into the sea, within a short distance of the beach, has been mainly responsible for these well-founded complaints. It was suggested that lengthening the outfall would remedy the nuisance, and the Local Government Board were asked to sanction the loan of £500 for the purpose; but, after hearing the pros and cons, they refused.

The matter being of extreme importance to the welfare of the district, the opinion of an eminent firm of engineers was sought, and a scheme was laid before the Council which will satisfy the most exacting critic. Briefly, the plan is to lay a sewer along the sea-front, across the River Otter, and allow the sewage to discharge to the east of this river automatically at certain states of the tide, all sewage thus running straight out to sea, and fouling of the fore-shore being thus rendered impossible. This scheme is estimated to cost about £5,000, and considering the benefits which Budleigh Salterton will enjoy when it is accomplished, the sum cannot be considered excessive. I may mention that under this scheme, the sewage of the houses at Stoneborough will drain into the sewer, which will be a decided improvement on the present system of a cesspit, and the same remarks apply to the Granary, the houses of which are not connected with any sewer, simply draining into cesspits and the overflow running into the leat.

VII. FACTORY AND WORKSHOP ACT, 1901.

The various provisions of this Act were briefly enumerated in a previous report. In such a small district as Budleigh Salterton the scope of this far-reaching Act is necessarily limited, but where any of the sections have applied, visits have been made by the Inspector and myself, and the premises have been found in every way satisfactory and convenient for the work being carried on in them, and no cases of overcrowding or want of ventilation or defective sanitary appliances have come, or been brought under our notice.

Appended hereto is the Report of the Sanitary Inspector, and you will see that much has been done by him in detecting and remedying nuisances which have arisen, and in systematically making inspections of premises which are controlled by Bye-laws, &c. In conclusion I must thank Mr. Percy Gill for his help, willingly given, in the compilation of this Report.

I am, Gentlemen,

Your obedient servant,

CLARENCE BEESLEY.

**Summary of Work done through the Sanitary Inspector in
the Urban District of Budleigh Salterton.**

	Number.
1. Complaints received.. .. .	12
2. Nuisances detected	23
3. „ abated	23
4. Slaughter Houses inspected	2
5. Bakehouses inspected	4
6. Dairies, Cowsheds and Milkshops inspected..	15
7. Houses connected with Mains	6
8. „ „ „ Sewers.. .. .	4
9. Samples of Water taken for Analysis ..	3
10. W.C.'s supplied with Water	4
11. New Lamps	Nil.
12. „ Pavements	2
13. „ Buildings erected	4
14. Drains tested by asphyxiator	16
15. Houses disinfected after illness.. .. .	2

Signed, PERCY GILL, Surveyor, &c.

January 21st, 1905.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1904 AND PREVIOUS YEARS.

Y <small>EAR</small> .	Population estimated to Middle of each Y <small>EAR</small> .	B <small>IRTHS</small> .		T <small>OTAL DEATHS REGISTERED IN THE</small> D <small>ISTRICT</small> .				T <small>OTAL</small> D <small>EA</small> T <small>H</small> S I <small>N</small> P <small>UBLIC</small> I <small>NSTITUTIONS</small> I <small>N</small> T <small>HE</small> D <small>ISTRICT</small> .	Deaths of Non- residents registered in Public Institu- tions in the District.	Deaths of Residents registered in Public Institu- tions beyond the District.	N <small>ETT DEATHS AT ALL</small> A <small>GES</small> BELONGING TO THE D <small>ISTRICT</small> .	
		N <small>UMBER</small> .	R <small>ATE</small> .	U <small>NDER 1 YEAR OF AGE</small> .		A <small>T ALL AGES</small> .						
				N <small>UMBER</small> .	R <small>ATE PER</small> 1,000 B <small>IRTHS</small> R <small>EGISTERED</small> .	N <small>UMBER</small> .	R <small>ATE</small> .					
1894	1777	36	20.2	3	27.7	31	16.8				31	16.8
1895	1779	35	19.6	1	28.6	38	21.3				38	21.3
1896	1770	38	21.4	8	210.5	39	22.0				39	22.0
1897	1770	30	16.9	8	266.6	32	18.0				32	18.0
1898	1770	26	14.1	1	38.5	34	19.2				34	19.2
1899	1880	20	11.1	2	100.0	34	18.8				34	18.8
1900	1883	18	10.0	2	111.1	26	14.4				26	14.4
1901	1885	23	12.2	1	43.4	34	18.0				34	18.0
1902	1897	25	13.1	0	0.0	21	11.0	1			21	11.0
1903	1910	34	17.8	3	88.2	28	14.6	3			28	14.6
Averages for years 1894-1903	1832	28	15.6	2.9	91.46	31.7	17.4	.4			31.7	17.4
1904	1947	34	17.0	1	29.4	32	16.4	2	Nil.	Nil.	32	16.4

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1904.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.						
	At all Ages.	At Ages—Years.					
		Under 1	1 to 5	5 to 15	15 to 25	25 to 65	65 and upw'ds
Small-pox							
Cholera							
Diphtheria							
Membranous croup ..							
Erysipelas	1					1	
Scarlet fever							
Typhus fever							
Enteric fever	1			1			
Relapsing fever ..							
Continued fever ..							
Puerperal fever ..							
Plague							
Totals	2			1		1	

CAUSES OF, AND AGES AT, DEATH DURING YEAR 1904.

CAUSES OF DEATH.	DEATHS IN OR BELONGING TO WHOLE DISTRICT AT SUBJOINED AGES.							Total Deaths in Public Insti- tutions in the Dis- trict.
	All ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and up- wards.	
Small-pox ..								
Measles ..								
Scarlet fever ..								
Whooping-cough ..	1		1					
Diphtheria and mem- branous croup ..								
Croup ..								
Fever { Typhus ..								
{ Enteric ..								
{ Other continued								
Epidemic influenza ..								
Cholera ..								
Plague ..								
Diarrhœa ..								
Enteritis ..								
Puerperal fever ..								
Erysipelas ..								
Other septic diseases								
Phthisis (pulmonary tuberculosis) ..	3			1		2		
Other tubercular diseases ..								
Cancer, malignant disease ..	6			1		2	3	
Bronchitis ..	1						1	
Pneumonia ..	3		1				2	
Pleurisy ..								
Other diseases of respir- atory organs ..								
Alcoholism ..	1					1		
Cirrhosis of liver ..								
Venereal diseases ..								
Premature birth ..								
Diseases and accidents of parturition ..								
Heart diseases ..	3		1			1	1	
Accidents ..								
Suicides ..	1					1		
Dentition ..	1		1					
Diabetes mellitus ..	3					1	2	
Cerebral disease ..	4						4	
All other causes ..	5	1				1	3	
All causes ..	32	1	4	2		9	16	2

